

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:

Kazunori YASUDA, et al.

Serial No: 10/787,062

Confirmation No.: 9539

Filed: February 25, 2004

For: ARTIFICIAL KNEE JOINT

Art Unit: 3738

Examiner: Cheryl L. Miller

I hereby certify that this correspondence
is being transmitted via electronic filing to:Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450 on

July 5, 2007

Date of Deposit

Diane Zynn

Name

Signature *Diane Zynn* 07/05/07

Date

Mail Stop AF

Commissioner for Patents

P.O. Box 1450

Alexandria, VA 22313-1450

Dear Sir:

Transmitted herewith is an amendment in the above-identified application.

☒ Attached are annotated and replacement sheets for Fig. 2.

The fee has been calculated as shown below:

	(Col. 1) CLAIMS REMAINING AFTER AMENDMENT		(Col. 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Col. 3) PRESENT EXTRA*	LG/SM \$ ENTITY FEE		ADD'L FEE DUE
TOTAL CLAIMS FEE	4	-	20	**	0	LG=\$50 SM=\$25 \$50	\$ 0
INDEPENDENT CLAIMS FEE	1	-	3	***	0	LG=\$200 SM=\$100 \$200	\$ 0
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIMS					LARGE ENTITY FEE = \$360 SMALL ENTITY FEE = \$180		\$ 0
ADDITIONAL SIZE FEE (IF ANY) (TOTAL PAGES OF SPEC AND DRAWINGS TOGETHER)					\$250 FOR EACH ADDITIONAL 50 SHEETS		\$ 0
Independent Claims: 1					TOTAL		\$ 0

* If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space. The "Highest Number Previously Paid For" (Total or Independent) is the highest number found from the equivalent box on Col. 1 of a prior amendment or the number of claims originally filed.

☐ Please charge the fee of \$___ for the additional claim fees to Deposit Account No. 50-1314. **A copy of this sheet is enclosed.**☐ Please charge the fee of \$___ for the extension of time to Deposit Account No. 50-1314. **A copy of this sheet is enclosed.**☒ The Commissioner is hereby authorized to charge any deficiencies of fees associated with this communication or credit any overpayment to Deposit Account No. 50-1314. **A copy of this sheet is enclosed.**☒ Any filing fees under 37 C.F.R. § 1.16 for the presentation of extra claims☒ Any patent application processing fees under 37 C.F.R. § 1.17Respectfully submitted,
HOGAN & HARTSON L.L.P.By: *Lawrence J. McClure*Lawrence J. McClure
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Date: July 5, 2007

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